UTAH DEPARTMENT OF HEALTH
Bureau of Epidemiology

Utah Department of Health
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Interim Guidelines for Influenza A H3N2v Diagnosis

Clinical Diagnosis:

- H3N2v infection cannot be clinically distinguished from seasonal influenza or other respiratory viruses.
- The key to suspecting H3N2v infection in an ill patient is to determine an epidemiological link to recent swine exposure in the week prior to illness onset.
    - Direct contact (raising or feeding pigs, cleaning pig waste) or indirect contact (visiting a pig farm, walking through a swine barn at an agricultural fair)
    - Close contact (within 6 feet) of an ill person who had recent swine exposure
        - At this time, human-to-human transmission of H3N2v virus infection is thought to be minimal (mainly within a family)
- Ill patients with an epidemiological link should be reported to public health, and should have laboratory testing performed
    - The Utah Department of Health, Bureau of Epidemiology can assist physicians in determining if patients have had an epidemiologic link.

Laboratory Diagnosis:

- Antigen detection tests
    - Antigen detection tests, including rapid influenza diagnostic tests (RIDTs) and immunofluorescent assays, may not detect influenza infections
        - This includes infections caused by seasonal human influenza viruses and variant influenza viruses like H3N2v
    - RIDTs that can detect influenza infections cannot differentiate between seasonal influenza A infection or H3N2v infection
    - If H3N2v infection is suspected, regardless of RIDT result, specimens should be collected and submitted for molecular testing to your normal laboratory provider
- Molecular assays
    - Available commercial assays are likely to detect H3N2v infection, although they will not be able to specify H3N2v virus infection
        - Test results will likely come back as either influenza A (H3) or influenza A (unsubtypeable)
- Unified State Laboratories: Public Health (USLPH) testing
    - USLPH is capable of testing specimens for H3N2v infection
    - Clinical/commercial laboratories will coordinate specimen submission to USLPH if H3N2v infection is suspected based on molecular testing results